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\*\* CONTINUING DATA \*\*\*\*\* *RA*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *RA*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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|                                                                                                                                                               |                            |                        |                       |                            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <i>RA</i>                                                     | STATE OR COUNTRY<br>CANADA | SHEETS<br>DRAWING<br>1 | TOTAL<br>CLAIMS<br>18 | INDEPENDENT<br>CLAIMS<br>3 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>RA</i> |                            |                        |                       |                            |
| Verified and Acknowledged<br><i>Ronald R. Chelbana</i><br>Examiner's Signature Initials                                                                       |                            |                        |                       |                            |

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## TITLE

Operationalizing a learning solution

|                                   |                                                                                                                   |                                                                                                                                                                                                                                                                                 |
|-----------------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FILING FEE RECEIVED</b><br>900 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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